



FEMA

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
Declaration of Continuing Need for Rental Assistance

(A) APPLICANT INFORMATION - Complete all fields.

FEMA Registration No: _____

Disaster No.: _____

Last Name, First Name, Middle Initial

Where do you live now? (Street Address, City, State, Zip)

What is your current mailing address (Street Address, City, State, Zip) **If different from where you live now.**

(B) CURRENT INCOME – What is your current household income after taxes? (Include income for everyone over the age of 18 living with you)

\$ _____ (Circle One: Weekly - Biweekly - Monthly - Annually)

(C) JOB SEARCH – You must check a box.

- ☐ I and/or someone in my household has a job.
- ☐ I and/or someone in my household is currently receiving Social Security, Temporary Assistance for Needy Families (TANF), and/or retirement benefits, and therefore not searching for a job.
- ☐ I and/or someone in my household is currently searching for a job. Below is a description of the job search (Attach a separate sheet of paper if needed):

(D) DECLARATION OF HOUSING STATUS – Based on the information in your file, your household may be eligible for more rent assistance. Please read the statements below carefully and check the box that fits your situation. **You must check a box.**

- ☐ My household still needs help paying our rent. We cannot pay our rent without help from FEMA.
- ☐ My household does NOT need help from FEMA with paying our rent.

(E) SIGNATURE - Sign this form to certify that the information you gave above is true and correct and that you understand the penalties for providing false information.

I understand that if I intentionally make false statements or conceal any information in an attempt to obtain additional disaster aid, it is a violation of federal and State laws.

Applicant's Signature

Date